

Crosswalk Management System

Report	REPORT CROSSWALK TO STATE
Filename	acrobat distiller
Run by	CWMS
Report Date	06-JAN-04 09:33

Crosswalk Report

Status : FN Substance Abuse and Mental Health Services Administration
Media ID : CBIS,NPC Office of Applied Studie
Start Date : 31-MAY-94
End Date :
Follow-up :

Missouri's Treatment Episode Data Set
Version : 1

K = Key Field		System	<u>Missouri</u>
Item		Item	
No.	Treatment Episode Data Set	Value	State System Data
1	System Transaction Type	-	System Transaction Type Added to Each Record
K 2	State Code	MO	FIPS Code Added to Each Record
3	Reporting Date	-	Month and Year of Submission Added to Each Record

Crosswalk Report

CWMS

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No. Treatment Episode Data Set

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State System Data

K 1	Provider Identifier	-	ADA Federal ID
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K 1	Provider Identifier	-	Facility Code
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No longer effective as of: 06-30-2001

K 2	Client Identifier (Admission)	-	State ID
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K 3	Co-Dependent/Collateral	-	Co Depend Ind
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2	No	N	No
1	Yes	Y	Yes

K 4	Client Transaction Type	-	Movement Type (MT)
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A	Initial Admission	AD	Admission
T	Transfer/Change in Service	TR	Transfer/Change in Service

K 5	Date of Admission	-	Program Episode Open Date
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K 5	Date of Admission	-	Commit Date
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No longer effective as of: 06-30-2001

6	Number of Prior Treatment Episodes	-	Prior Detox, Prior Resident, Prior Outpatient
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State System Data

7	Principal Source of Referral	-	Referral Source
01	Individual (includes self-referral))	10	Family, Relatives
01	Individual (includes self-referral))	11	Friends
01	Individual (includes self-referral))	12	Former Client
01	Individual (includes self-referral))	19	Self
03	Other Health Care Provider	20	Public Mental Hospital (unspecified)
03	Other Health Care Provider	21	Veterans Administration
03	Other Health Care Provider	22	DMH Regional Clinic
03	Other Health Care Provider	23	DMH Residential Treatment Center for Children
03	Other Health Care Provider	24	DMH Rehabilitation Center
03	Other Health Care Provider	30	Other Mental Health Facility
03	Other Health Care Provider	39	Nursing Home
03	Other Health Care Provider	40	Medical Facility (Non Mental Health)
03	Other Health Care Provider	41	Non Psychiatric Physician
06	Other Community Referral	50	Social or Community Agency (Unspecified)
06	Other Community Referral	51	Dept of Social Services
06	Other Community Referral	52	Head Start
06	Other Community Referral	53	Ofc of Economic Opportunity
06	Other Community Referral	54	United Cerebral Palsy
06	Other Community Referral	55	Association for Retarded Children (chapters or classes)
06	Other Community Referral	56	Sheltered Workshop
02	Alcohol/Drug Abuse Provider	57	Free Standing ADA Agency
06	Other Community Referral	58	Community Mental Health Center
03	Other Health Care Provider	60	Private Practice Mental Health Professional
04	School (Educational)	70	School System (Unspecified)
04	School (Educational)	71	State School for Retarded
07	Court/Criminal Justice/DUI/DWI	80	Court, Law Enforcement or Correction Agency
07	Court/Criminal Justice/DUI/DWI	81	Federal/State/County/Probation
07	Court/Criminal Justice/DUI/DWI	82	Federal/State/County/Parole
07	Court/Criminal Justice/DUI/DWI	83	TASC (Treatment Alternative to Street Crime)

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State System Data

7	Principal Source of Referral	-	Referral Source
07	Court/Criminal Justice/DUI/DWI	84	Other Non Voluntary
07	Court/Criminal Justice/DUI/DWI	85	Drug Court Referral
01	Individual (includes self-referral))	86	Attorney/Legal Counsel
97	Unknown	90	Other (Unspecified)
06	Other Community Referral	91	Clergy
06	Other Community Referral	92	Self Help Group (AA)
07	Court/Criminal Justice/DUI/DWI	93	ARTOP - DWI (Alcohol Related Traffic Offenders Program)
97	Unknown	99	Unknown

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State System Data

7	Principal Source of Referral	-	Referral Source
01	Individual (includes self-referral))	10	Family, Relatives
01	Individual (includes self-referral))	11	Friends
01	Individual (includes self-referral))	12	Former Client
01	Individual (includes self-referral))	19	Self
03	Other Health Care Provider	20	Public Mental Hospital (unspecified)
03	Other Health Care Provider	21	Veterans Administration
03	Other Health Care Provider	22	DMH Regional Clinic
03	Other Health Care Provider	23	DMH Residential Treatment Center for Children
03	Other Health Care Provider	24	DMH Rehabilitation Center
03	Other Health Care Provider	30	Other Mental Health Facility
03	Other Health Care Provider	39	Nursing Home
03	Other Health Care Provider	40	Medical Facility (Non Mental Health)
03	Other Health Care Provider	41	Non Psychiatric Physician
06	Other Community Referral	50	Social or Community Agency (Unspecified)
06	Other Community Referral	51	Dept of Social Services
06	Other Community Referral	52	Head Start
06	Other Community Referral	53	Ofc of Economic Opportunity
06	Other Community Referral	54	United Cerebral Palsy
06	Other Community Referral	55	Association for Retarded Children (chapters or classes)
06	Other Community Referral	56	Sheltered Workshop
02	Alcohol/Drug Abuse Provider	57	Free Standing ADA Agency
04	School (Educational)	70	School System (Unspecified)
04	School (Educational)	71	State School for Retarded
07	Court/Criminal Justice/DUI/DWI	80	Court, Law Enforcement or Correction Agency
07	Court/Criminal Justice/DUI/DWI	82	Federal/State/County/Probation
07	Court/Criminal Justice/DUI/DWI	83	Federal/State/County/Parole
07	Court/Criminal Justice/DUI/DWI	84	TASC (Treatment Alternative to Street Crime)
07	Court/Criminal Justice/DUI/DWI	85	Other Non Voluntary
06	Other Community Referral	91	Clergy

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7 Principal Source of Referral - Referral Source

06	Other Community Referral	92	Self Help Group (AA)
97	Unknown	97	Other (Unspecified)
97	Unknown	99	Unknown

No longer effective as of: 06-30-2001

8 Date of Birth - Birthdate

9 Sex - Sex

2	Female	F	Female
1	Male	M	Male

10 Race - Race

05	White	01	White (Not of Hispanic Origin)
04	Black or African American	02	Black (Not of Hispanic Origin)
02	American Indian (Other than Alaskan Native)	03	American Indian
20	Other	04	Spanish American
03	Asian or Pacific Islander	05	Oriental
20	Other	06	Other
97	Unknown	09	Unknown
01	Alaska Native (Aleut, Eskimo, Indian)	10	Alaskan Native (Aleut, Eskimo Indian)
03	Asian or Pacific Islander	11	Asian or Pacific Islander

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State System Data

10 Race

-

Race

05	White	01	White (Not of Hispanic Origin)
04	Black or African American	02	Black (Not of Hispanic Origin)
02	American Indian (Other than Alaskan Native)	03	American Indian
20	Other	04	Spanish American
03	Asian or Pacific Islander	05	Oriental
20	Other	06	Other
97	Unknown	09	Unknown
01	Alaska Native (Aleut, Eskimo, Indian)	10	Alaskan Native (Aleut, Eskimo Indian)
03	Asian or Pacific Islander	11	Asian or Pacific Islander
20	Other	16	Bi-Racial
23	Native Hawaiians or Other Pacific Islanders		

11 Ethnicity

-

Hispanic Origin

01	Puerto Rican	01	Puerto Rican
02	Mexican	02	Mexican
03	Cuban	03	Cuban
04	Other Specific Hispanic	04	Other Hispanic
05	Not of Hispanic Origin	05	Not of Hispanic Origin
97	Unknown	97	Unknown

11 Ethnicity

-

Race

97	Unknown	09	Unknown
01	Puerto Rican	12	Hispanic, Puerto Rican
02	Mexican	13	Hispanic, Mexican
03	Cuban	14	Hispanic, Cuban
04	Other Specific Hispanic	15	Other Hispanic
98	Not Collected	98	Not Collected

No longer effective as of: 06-30-2001

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State System Data

12 Education

-

Education

00	Less Than One Grade Completed	00-11	Kindergarden to 11th grade
00	Less Than One Grade Completed	12	High School Grad/GED
00	Less Than One Grade Completed	13	1 Year of College
00	Less Than One Grade Completed	14	2 Years of College
00	Less Than One Grade Completed	15	3 Years of College
00	Less Than One Grade Completed	16	College Graduate
00	Less Than One Grade Completed	17	1 Year Graduate
00	Less Than One Grade Completed	18	Masters Degree
00	Less Than One Grade Completed	19	3 Years Graduate
00	Less Than One Grade Completed	20	Doctorate Degree
00	Less Than One Grade Completed	30	Technical School in Lieu of High School. This = CDS value 12.
00	Less Than One Grade Completed	40	Tehnical School in Addition to High School. This = CDS value 12.
97	Unknown	49	No Academic Education
98	Not Collected	98	Not Collected
97	Unknown	99	unknown

No longer effective as of: 09-30-2002

12 Education

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Education

00	Less Than One Grade Completed	00	Kindergarten
01-25	Highest School Grade in Number of Years (12=GED)	01-20	Years of School (highest grade) Completed
01-25	Highest School Grade in Number of Years (12=GED)	30	Technical School in Lieu of High School. This = CDS value 12.
01-25	Highest School Grade in Number of Years (12=GED)	40	Tehnical School in Addition to High School. This = CDS value 12.
97	Unknown	49	No Academic Education
97	Unknown	99	unknown

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Value

State System Data

13 Employment Status

-

Employment Status

04 Not in Labor Force

1 Unemployed, has not sought
employment in last 30 days

03 Unemployed

2 Unemployed, has sought employment in
last 30 days

02 Part Time

3 Part time (Less than 35 Hours per week)

01 Full Time

4 Full Time (35 hours or more per week)

No longer effective as of: 05-31-1994

13 Employment Status

-

Employment Status

04 Not in Labor Force

1 Unemployed, has not sought
employment in last 30 days

03 Unemployed

2 Unemployed, has sought employment in
last 30 days

02 Part Time

3 Part time (Less than 35 Hours per week)

01 Full Time

4 Full Time (35 hours or more per week)

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State System Data

14	Substance Problem Codes (Primary-14A,Secondary-14B, Tertiart-14C)	-	Drugs Used Codes, Primary, Secondary, Tertiary.
02	Alcohol	0201	Alcohol
03	Cocaine, Crack	0301	Crack
03	Cocaine, Crack	0302	Other Cocaine
04	Marijuana, Hashish (includesTHC and other Cannabis Sativa preparations)	0401	Marijuana/Hashish
05	Heroin	0501	Heroin/Morphine
06	Non-Prescription Methadone	0601	Non RX Methadone
07	Other Opiates and Synthetics	0701	Codeine
07	Other Opiates and Synthetics	0702	D-Propoxphene
07	Other Opiates and Synthetics	0703	Oxycodone
07	Other Opiates and Synthetics	0704	Meperidine HCL
07	Other Opiates and Synthetics	0705	Hydromorphone
07	Other Opiates and Synthetics	0706	Other Narcotic Analgesics
07	Other Opiates and Synthetics	0707	Pentazocine
08	PCP	0801	PCP or PCP Combinations
09	Other Hallucinogens	0901	LSD
09	Other Hallucinogens	0902	Other Hallucinogens
10	Methamphetamine	1001	Methamphetamine/Speed
11	Other Amphetamines	1101	Amphetamines
11	Other Amphetamines	1102	Methylphenidate
11	Other Amphetamines	1103	Ecstasy/MDMA
12	Other Stimulants	1201	Other Stimulants
13	Benzodiazepine	1301	Alprazolam
13	Benzodiazepine	1302	Chlordiazepoxide
13	Benzodiazepine	1303	Clorazepate
13	Benzodiazepine	1304	Diazepam
13	Benzodiazepine	1305	Flurazepam
13	Benzodiazepine	1306	Lorazepam
13	Benzodiazepine	1307	Triazolam
14	Other Tranquilizers	1401	Meprobamate
13	Benzodiazepine	1402	Other Benzodiazepine

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State System Data

14	Substance Problem Codes (Primary-14A,Secondary-14B, Tertiat-14C)	-	Drugs Used Codes, Primary, Secondary, Tertiary.
14	Other Tranquilizers	1403	Other Tranquilizer
15	Barbiturates	1501	Phenobarbital
15	Barbiturates	1502	Secobarbital/Amobarbital
15	Barbiturates	1503	Secobarbital
15	Barbiturates	1515	Other Barbiturates
16	Other Sedatives or Hypnotics	1601	Ethchlorvynol
16	Other Sedatives or Hypnotics	1602	Glutethimide
16	Other Sedatives or Hypnotics	1603	Methaqualone
16	Other Sedatives or Hypnotics	1604	Other Non-Barbituate Sedatives
16	Other Sedatives or Hypnotics	1605	Other Sedatives
07	Other Opiates and Synthetics	1607	Other Opiates and Synthetics
17	Inhalants	1701	Aerosols
17	Inhalants	1702	Nitrites
17	Inhalants	1703	Other Inhalants
17	Inhalants	1704	Solvents
17	Inhalants	1705	Anesthetics
18	Over-the-Counter	1718	Over-The-Counter
18	Over-the-Counter	1801	Diphenhydramine
20	Other	2001	Diphenylhydantoin Sodium
20	Other	2002	Other Drugs
20	Other	2003	Tabacco (Secondary and Tertiary Only)
97	Unknown	3001	Pathological Gambling
01	None	9996	None
97	Unknown	9997	Unknown
98	Not Collected	9998	Not Collected

No longer effective as of: 09-30-2002

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Value

State System Data

14	Substance Problem Codes (Primary-14A,Secondary-14B, Tertiart-14C)	-	Drugs Used Codes, Primary, Secondary, Tertiary.
02	Alcohol	0201	Alcohol
03	Cocaine, Crack	0301	Crack
03	Cocaine, Crack	0302	Other Cocaine
04	Marijuana, Hashish (includesTHC and other Cannabis Sativa preparations)	0401	Marijuana/Hashish
05	Heroin	0501	Heroin
06	Non-Prescription Methadone	0601	Methadone
08	PCP	0801	PCP or PCP Combinations
09	Other Hallucinogens	0902	Other Hallucinogens
10	Methamphetamine	1001	Methamphetamine/Speed
11	Other Amphetamines	1101	Amphetamines
11	Other Amphetamines	1103	Ecstasy/MDMA
12	Other Stimulants	1201	Other Stimulants
13	Benzodiazepine	1402	Other Benzodiazepine
14	Other Tranquilizers	1403	Other Tranquilizer
15	Barbiturates	1515	Barbiturates
16	Other Sedatives or Hypnotics	1605	Other Sedatives
07	Other Opiates and Synthetics	1607	Other Opiates and Synetics
17	Inhalants	1703	Other Inhalants
18	Over-the-Counter	1718	Over-The-Counter
20	Other	2002	Other Drugs
20	Other	2003	Tabacco (Secondary and Tertiary Only)
97	Unknown	3001	Pathological Gambling
01	None	9996	None

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15 Usual Route of Administration (Primary-15A, Secondary-15B, Tertiari-15C) - Admin Route Prim

01	Oral	1	Oral
02	Smoking	2	Smoking
03	Inhalation	3	Inhalation
04	Injection (IV or intramuscular)	4	Intramuscular
04	Injection (IV or intramuscular)	5	Intavenous

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15 Usual Route of Administration (Primary-15A, Secondary-15B, Tertiari-15C) - SA Administration Route

20	Other	0	No Drug Used
01	Oral	1	Oral
02	Smoking	2	Smoking
03	Inhalation	3	Inhalation
04	Injection (IV or intramuscular)	4	Intramuscular
04	Injection (IV or intramuscular)	5	Intavenous
97	Unknown	7	Unknown
98	Not Collected	8	Not Collected

16 Frequency of Use (Primary-16A, Secondary-16B, Tertiary-16C) - Frequency Use Primary

01	No past month use	0	Not used during month prior to admission
02	1-3 times in past month	1	Less than once per week
03	1-2 times per week	2	Once Per Week
04	3-6 times per week	3	Several times per week
05	Daily	4	Once Daily

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16	Frequency of Use (Primary-16A, Secondary-16B, Tertiary-16C)	-	SA Frequency
01	No past month use	01	No Past Month Use
02	1-3 times in past month	02	1-3 Times in Past Month
03	1-2 times per week	03	1-2 Times Per Week
04	3-6 times per week	04	3-6 Times Per Week
05	Daily	05	Daily
97	Unknown	97	Unknown
98	Not Collected	98	Not Collected
17	Age of First Use (Primary-17A, Secondary-17B, Tertiary-17C)	-	Age of First Use
00	Indicates a Newborn with a substance dependency problem	00	NewBornw with SA problem
00-95	Indicates The Age at First Use	1-96	Age at first use
97	Unknown	97	Unknown
98	Not Collected	98	Not Collected
97	Unknown	99	None

17 Age of First Use (Primary-17A, Secondary-17B, Tertiary-17C) - **Frst Drug Age Prim**

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State System Data

K 18	Type of Services	-	Program Code
06	Intensive Outpatient	102	CSTAR Women and Children
06	Intensive Outpatient	103	CSTAR Adolescent
06	Intensive Outpatient	104	CSTAR General Adult
02	Free-standing Residential (Detox, 24 hour Service)	111	Social Setting Detox
01	Hospital Inpatient (Detox, 24 hour Service)	112	Modified Medical Dextox
01	Hospital Inpatient (Detox, 24 hour Service)	113	Medical Detoxification
08	Ambulatory Detoxification	114	Ambulatory Detox
03	Hospital (other than detox)	115	Hospital Inpatient (other than Detox)
04	Short-term, (30 days or fewer)	116	Thirty Days Or Less Residential
05	Long-term, (more than 30 days)	117	Over Thirty Days To One Year Residential
07	Non-Intensive Outpatient	118	Outpatient
07	Non-Intensive Outpatient	119	Methadone Treatment
07	Non-Intensive Outpatient	127	Adult Clinical Intervention Program
07	Non-Intensive Outpatient	128	Youth Clinical Intervention Program
07	Non-Intensive Outpatient	140	Serious & Repeat Offender's Proj
06	Intensive Outpatient	142	Primary Recovery Plus (PR+)
02	Free-standing Residential (Detox, 24 hour Service)	143	SS Detox Primary Recovery Plus

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Item

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Value

State System Data

K 18	Type of Services	-	Program Code
06	Intensive Outpatient	102	CSTAR Women and Children
06	Intensive Outpatient	103	CSTAR Adolescent
06	Intensive Outpatient	104	CSTAR General Adult
02	Free-standing Residential (Detox, 24 hour Service)	111	Social Setting Detox
01	Hospital Inpatient (Detox, 24 hour Service)	112	Modified Medical Dextox
01	Hospital Inpatient (Detox, 24 hour Service)	113	Medical Detoxification
08	Ambulatory Detoxification	114	Ambulatory Detox
03	Hospital (other than detox)	115	Hospital Inpatient (other than Detox)
04	Short-term, (30 days or fewer)	116	Thirty Days Or Less Residential
05	Long-term, (more than 30 days)	117	Over Thirty Days To One Year Residential
07	Non-Intensive Outpatient	118	Outpatient
07	Non-Intensive Outpatient	119	Methadone Treatment
07	Non-Intensive Outpatient	127	Adult Clinical Intervention Program
07	Non-Intensive Outpatient	128	Youth Clinical Intervention Program
07	Non-Intensive Outpatient	140	Serious & Repeat Offender's Proj
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19 Use of Methadone Planned/Actual**-****Drug Prescribed Code**

2 No

- All other responses

1 Yes

01 Methadone

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K = Key Field		Optional		<u>Missouri</u>
Item		Item		
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1	Detail Drug Code, Primary	-	Not Collected	

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Optional

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Item	Item		
No.	Treatment Episode Data Set	Value	State System Data

1	Detail Drug Code, Primary	-	Drugs Used Codes, Primary, Secondary, Tertiary.
	0201 Alcohol		0201 Alcohol
	0301 Crack		0301 Crack
	0302 Other Cocaine		0302 Other Cocaine
	0401 Marijuana/Hashish		0401 Marijuana/Hashish
	0501 Heroin/Morphine		0501 Heroin/Morphine
	0601 Methadone		0601 Non RX Methadone
	0701 Codeine		0701 Codeine
	0702 D-Propoxyphene		0702 D-Propoxyphene
	0703 Oxycodone		0703 Oxycodone
	0704 Meperidine HCL		0704 Meperidine HCL
	0705 Hydromorphone		0705 Hydromorphone
	0706 Other Narcotic Analgesics		0706 Other Narcotic Analgesics
	0707 Pentazocine		0707 Pentazocine
	0801 PCP or PCP Combinations		0801 PCP or PCP Combinations
	0901 LSD		0901 LSD
	0902 Other Hallucinogens		0902 Other Hallucinogens
	1001 Methamphetamine/Speed		1001 Methamphetamine/Speed
	1101 Amphetamine		1101 Amphetamines
	1102 Methylphenidate (Ritalin)		1102 Methylphenidate
	1201 Other Stimulants		1201 Other Stimulants
	1301 Alprazolam (Xanax)		1301 Alprazolam
	1302 Chlordiazepoxide (Librium)		1302 Chlordiazepoxide
	1303 Clorazepate (Tranzene)		1303 Clorazepate
	1304 Diazepam (Valium)		1304 Diazepam
	1305 Flurazepam (Dalmane)		1305 Flurazepam
	1306 Lorazepam (Ativan)		1306 Lorazepam
	1307 Triazolam (Halcion)		1307 Triazolam
	1401 Meprobamate (Miltown)		1401 Meprobamate
	1308 Other Benzodiazepine		1402 Other Benzodiazepine
	1403 Other Tranquilizer		1403 Other Tranquilizer
	1501 Phenobarbital		1501 Phenobarbital
	1502 Secobarbital/Amobarbital		1502 Secobarbital/Amobarbital

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Item	Item	Value	State System Data
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1	Detail Drug Code, Primary	-	Drugs Used Codes, Primary, Secondary, Tertiary.
1503	Secobarbital (Seconal)	1503	Secobarbital
2002	Other Drugs	1508	Other Barbiturates
1601	Ethchlorvynol (Placidyl)	1601	Ethchlorvynol
1602	Glutethimide (Doriden)	1602	Glutethimide
1603	Methaqualone	1603	Methaqualone
1604	Other Non-Barbiturate Sedatives	1604	Other Non-Barbiturate Sedatives
1605	Other Sedatives	1605	Other Sedatives
2002	Other Drugs	1607	Other Opiates and Synthetics
1701	Aerosols	1701	Aerosols
1702	Nitrites	1702	Nitrites
1703	Other Inhalants	1703	Other Inhalants
1704	Solvents	1704	Solvents
1705	Anesthetics	1705	Anesthetics
2002	Other Drugs	1718	Over-The-Counter
1801	Diphenhydramine	1801	Diphenhydramine
2001	Diphenylhydantoin Sodium	2001	Diphenylhydantoin Sodium
2002	Other Drugs	2002	Other Drugs
9997	Unknown	9996	None
9997	Unknown	9997	Unknown
9998	Not Collected	9998	Not Collected

No longer effective as of: 09-30-2002

2	Detail Drug Code, Secondary	-	Not Collected
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3	Detail Drug Code, Tertiary	-	Not Collected
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4	DSM Diagnosis	-	Not Collected
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Optional

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Item	Treatment Episode Data Set	Item	Value	State System Data
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5	Psychiatric Problem in Addition to Alcohol or Drug Problem	-	Prob Subst Abuse, Prob Mental Health
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2	No	-	-
1	Yes	PMH(Unable to Communicate 11)
1	Yes	PMH(Distorted Communication 12)
1	Yes	PMH(Maladaptive Behavior 13)
1	Yes	PMH(Attempts Normal Behavior 14)
1	Yes	PMH(Normal/Mature Behavior 15)
1	Yes	PMH(Above AVERAGE Maturity 16)
1	Yes	PMH(Self Actualizing Behavior 17)
1	Yes	PSA(0	Severe Addiction 1)
1	Yes	PSA(0	Addiction 2)
1	Yes	PSA(0	Strong Psych Dependence 3)
1	Yes	PSA(0	Psychological Dependency 4)
1	Yes	PSA(0	Generally in Control 5)
1	Yes	PSA(0	Always Under Control 6)

No longer effective as of: 05-31-1994

5	Psychiatric Problem in Addition to Alcohol or Drug Problem	-	Additional Psychiatric Problem
---	------------------------------------------------------------	---	--------------------------------

1	Yes	1	Yes
2	No	2	No

6	Pregnant at Time of Admission	-	Not Collected
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No longer effective as of: 05-31-1994

Missouri's Treatment Episode Data Set
Version : 1

K = Key Field			Optional		<u>Missouri</u>	
Item		Item		Value		
No.	Treatment Episode Data Set			State System Data		
6	Pregnant at Time of Admission			-	Preg at Time of Admission	
1	Yes			1	Yes	
2	No			2	No	
7	Unknown			7	Unknown	
8	Not Collected			8	Not Collected	
7	Veteran Status			-	Vet Status	
1	Yes			1	Yes	
2	No			2	No	
7	Unknown			3	Unknown	

Missouri's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Missouri

Item

Item

No. Treatment Episode Data Set

Value

State System Data

8	Living Arrangements	-	Living Arrangements
02	Dependent Living	01	Age <=18 Both Parents
02	Dependent Living	02	Age <=18 Single Parents
02	Dependent Living	03	Age <=18 Other Relatives
02	Dependent Living	04	Age <=18 Foster Home
02	Dependent Living	05	Age <=18 Private Care Facility
02	Dependent Living	06	Age <=18 Public Care Facility
03	Independent Living	07	Age <=18 Independent Living
02	Dependent Living	08	Age <=18 Other
03	Independent Living	09	Alone Age >= 18
02	Dependent Living	10	Age <=18 Parent-Step-Parent
03	Independent Living	11	With Family Age >= 18
03	Independent Living	12	With Unrelated Person Age >= 18
02	Dependent Living	13	Adult Foster Care Age >= 18
02	Dependent Living	14	Nusing Care Age >= 18
02	Dependent Living	15	Transitional Age >= 18
02	Dependent Living	16	Other Public/Private Age >= 18
02	Dependent Living	17	Age >=18 Parent or Siblings
97	Unknown	18	Age >= 18 Other
01	Homeless	19	Homeless Age >= 18
03	Independent Living	20	With Spouse Only Age >= 18
03	Independent Living	96	Oxford Housing
03	Independent Living	97	CSTAR Supported Housing
02	Dependent Living	98	CSTAR Residential
97	Unknown	99	Refused to Answer/Not Available

Missouri's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Missouri

Item

Item

No. Treatment Episode Data Set

Value

State System Data

8	Living Arrangements	-	Living Arrangements
03	Independent Living	09	Alone Age>= 18
03	Independent Living	11	With Family Age>= 18
03	Independent Living	12	With Unrelated Person Age>= 18
02	Dependent Living	13	Adult Foster Care Age>= 18
02	Dependent Living	14	Nusing Care Age>= 18
02	Dependent Living	15	Transitional Age>= 18
02	Dependent Living	16	Other Public/Private Age>= 18
01	Homeless	19	Homeless Age>= 18
03	Independent Living	20	With Spouse Only Age>= 18
97	Unknown	99	Refused to Answer/Not Available

No longer effective as of: 06-30-2001

9	Primary Source of Income/Support	-	Income Source
20	Other	01	Illegal
01	Wages/Salary	02	Employment
20	Other	03	Savings
04	Disability	04	Disability
03	Retirement/Pension	05	Retirement
20	Other	06	Unemployment
02	Public Assistance	07	Public Assistance
20	Other	08	Family/Friends
20	Other	09	Other
21	None	10	None

Crosswalk Report

CWMS

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Missouri's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Missouri

Item

Item

No. Treatment Episode Data Set

Value

State System Data

9	Primary Source of Income/Support	-	Income Source
20	Other	1	Illegal
01	Wages/Salary	2	Employment
20	Other	3	Savings
04	Disability	4	Disability
03	Retirement/Pension	5	Retirement
20	Other	6	Unemployment
02	Public Assistance	7	Public Assistance
20	Other	8	Family/Friends
20	Other	9	Other
97	Unknown	97	Unknown
98	Not Collected	98	Not Collected
No longer effective as of: 09-30-2002			

Missouri's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Missouri

Item	Item	Value	State System Data
No.	Treatment Episode Data Set		

10	Health Insurance	-	Insurance
21	None	000	None
02	Blue Cross/Blue Shield	063	Blue Cross/Blue Shield - various plans
02	Blue Cross/Blue Shield	079-091	Blue Cross/Blue Shield - various plans
20	Other (e.g. TriCare, Champus)	122	CHAMPUS/CHAMPVA
20	Other (e.g. TriCare, Champus)	123	CHAMPUS Insurance
02	Blue Cross/Blue Shield	178	Blue Cross/Blue Shield - various plans
02	Blue Cross/Blue Shield	488	Blue Cross/Blue Shield - various plans
02	Blue Cross/Blue Shield	493	Blue Cross/Blue Shield - various plans
02	Blue Cross/Blue Shield	498	Blue Cross/Blue Shield - various plans
02	Blue Cross/Blue Shield	539	Blue Cross/Blue Shield - various plans
02	Blue Cross/Blue Shield	546	Blue Cross/Blue Shield - various plans
02	Blue Cross/Blue Shield	552	Blue Cross/Blue Shield - various plans
02	Blue Cross/Blue Shield	556	Blue Cross/Blue Shield - various plans
02	Blue Cross/Blue Shield	561	Blue Cross/Blue Shield - various plans
02	Blue Cross/Blue Shield	567	Blue Cross/Blue Shield - various plans
02	Blue Cross/Blue Shield	570	Blue Cross/Blue Shield - various plans
02	Blue Cross/Blue Shield	577	Blue Cross/Blue Shield - various plans
02	Blue Cross/Blue Shield	586-603	Blue Cross/Blue Shield - various plans
04	Medicaid	640	Kansas Medicaid
03	Medicare	675	Medicare - HMO
02	Blue Cross/Blue Shield	719	Blue Cross/Blue Shield - various plans
02	Blue Cross/Blue Shield	726	Blue Cross/Blue Shield - various plans
02	Blue Cross/Blue Shield	747	Blue Cross/Blue Shield - various plans
02	Blue Cross/Blue Shield	760	Blue Cross/Blue Shield - various plans
02	Blue Cross/Blue Shield	774	Blue Cross/Blue Shield - various plans
02	Blue Cross/Blue Shield	776	Blue Cross/Blue Shield - various plans
02	Blue Cross/Blue Shield	780	Blue Cross/Blue Shield - various plans
04	Medicaid	997	Medicaid
03	Medicare	998	Medicare
20	Other (e.g. TriCare, Champus)	999	Other Public Funded Health Care
01	Private Insurance (other than BCBS or HMO)	All other	codes

Crosswalk Report

Missouri's Treatment Episode Data Set
Version : 1

K = Key Field		Optional		<u>Missouri</u>	
Item		Item			
No.	Treatment Episode Data Set		Value	State System Data	
10	Health Insurance	-	Insurance	No longer effective as of: 09-30-2002	

Missouri's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Missouri

Item		Item	Value	State System Data
No.	Treatment Episode Data Set			
10	Health Insurance	-	Insurance	
20	Other (e.g. TriCare, Champus)	-	All other valid codes	
21	None	000	None	
02	Blue Cross/Blue Shield	063	BC/BS ST. Louis 241/741	
02	Blue Cross/Blue Shield	079	Blue Cross	
02	Blue Cross/Blue Shield	080	BC/Northwestern N.Y., Inc	
02	Blue Cross/Blue Shield	081	BC/Western Pennsylvania	
02	Blue Cross/Blue Shield	082	BC/BS of Iowa	
02	Blue Cross/Blue Shield	083	BC/BS of Kansas	
02	Blue Cross/Blue Shield	084	CENTRA Benefits Services	
02	Blue Cross/Blue Shield	085	BC/BS of Kentucky	
02	Blue Cross/Blue Shield	086	BC/BS of Michigan	
02	Blue Cross/Blue Shield	087	BC/BS of Nebraska	
02	Blue Cross/Blue Shield	088	BC/BS of Tennessee	
02	Blue Cross/Blue Shield	089	BC/BS of SOWEST Virginia	
02	Blue Cross/Blue Shield	090	Blue Shield/Kansas	
02	Blue Cross/Blue Shield	091	Blue Shield of St. Louis	
20	Other (e.g. TriCare, Champus)	122	CHAMPUS/CHAMPVA	
20	Other (e.g. TriCare, Champus)	123	CHAMPUS Insurance	
02	Blue Cross/Blue Shield	178	Federal Blue Cross	
02	Blue Cross/Blue Shield	488	Blue Choice inc, (HMO , MO)	
02	Blue Cross/Blue Shield	493	Blue Advantage - KC/ST JOS	
02	Blue Cross/Blue Shield	498	BC/BS of Kansas City	
02	Blue Cross/Blue Shield	539	BC/BS of Alabama	
02	Blue Cross/Blue Shield	546	BC/BS of Georgia	
02	Blue Cross/Blue Shield	552	BC/BS of Oklahoma	
02	Blue Cross/Blue Shield	556	Alliance Perferred Blue	
02	Blue Cross/Blue Shield	561	Blue Cross of California	
02	Blue Cross/Blue Shield	567	BC/BS of New Jersey	
02	Blue Cross/Blue Shield	570	Blue Shield, Regence	
02	Blue Cross/Blue Shield	577	Perferred Blue Care	
02	Blue Cross/Blue Shield	586	BC/BS First Choice	
02	Blue Cross/Blue Shield	587	BC/BS Alliance	
02	Blue Cross/Blue Shield	588	BC/BS Blue Care	

Missouri's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Missouri

Item	Item	Value	State System Data
No.	Treatment Episode Data Set		
10	Health Insurance	-	Insurance
02	Blue Cross/Blue Shield	589	BC/BS Caring For Children
02	Blue Cross/Blue Shield	590	BC/BS Empire
02	Blue Cross/Blue Shield	591	BC/BS Federal PRO
02	Blue Cross/Blue Shield	592	BC/BS Healthy Alliance
02	Blue Cross/Blue Shield	593	BC/BS Mental Health
02	Blue Cross/Blue Shield	594	BC/BS of Alabama Preferred
02	Blue Cross/Blue Shield	595	BC/BS of Illinois
02	Blue Cross/Blue Shield	596	BC/BS of Kansas Select
02	Blue Cross/Blue Shield	597	BC/BS of Massachusetts
02	Blue Cross/Blue Shield	598	BC/BS of Missouri
02	Blue Cross/Blue Shield	599	BC/BS of Salt Lake City
02	Blue Cross/Blue Shield	600	BC/BS Preferred
02	Blue Cross/Blue Shield	601	BC/BS Select
02	Blue Cross/Blue Shield	602	BC/BS Total Health
02	Blue Cross/Blue Shield	603	BC/BS New Directions
02	Blue Cross/Blue Shield	640	Kansas Medicaid
02	Blue Cross/Blue Shield	675	Medicare - HMO
02	Blue Cross/Blue Shield	719	Blue Advantage + -MC+
02	Blue Cross/Blue Shield	726	BC/BS of Connecticut
02	Blue Cross/Blue Shield	747	Blue Advantage of Kansas
02	Blue Cross/Blue Shield	760	Blue Shield Federal Employee Program
02	Blue Cross/Blue Shield	774	BC/BS of South Carolina
02	Blue Cross/Blue Shield	776	Anthem Blue Cross/Blue Shield
02	Blue Cross/Blue Shield	780	Blue Shield of California
02	Blue Cross/Blue Shield	805	Blue Shield of Mississippi
04	Medicaid	997	Medicaid
03	Medicare	998	Medicare
20	Other (e.g. TriCare, Champus)	999	Other Public Funds for Health Care

11 Expected/Actual Primary Source of Payment - Not Collected

No longer effective as of: 05-31-1994

Missouri's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Missouri

Item

Item

No. Treatment Episode Data Set

Value

State System Data

11	Expected/Actual Primary Source of Payment	-	Ex. Prim. Src. P'mnt
01	Self-Pay	01	Self-Pay
02	Blue Cross/Blue Shield	02	Blue Cross/Blue Shield
03	Medicare	03	Medicare
04	Medicaid	04	Medicaid
05	Other Government Payments	05	Other Gov't Payments
06	Worker's Compensation	06	Worker's Compensation
07	Other Health Insurance Companies	07	Other Health Insurance Companies
08	No Charge (Free, CHarity, Special Research ot Teaching)	08	No Charge (free, Charity, special research, or teaching)
09	Other	09	Other
97	Unknown	97	Unknown
98	Not Collected	98	Not Collected

Missouri's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Missouri

Item

Item

No. Treatment Episode Data Set

Value

State System Data

12 Detailed Not in Labor Force

-

-

06 Other

01 Professional

06 Other

02 Farmers & Farm Manager

06 Other

03 Managers, Officials

06 Other

04 Proprietors, Clerical Workers

06 Other

05 Sales Workers

06 Other

06 Craftsmen

06 Other

07 Operatives (Mechanical Industry)

06 Other

08 Service & Private Household Workers

06 Other

09 Farm Laborers

06 Other

10 Laborers, Non Farm

01 Homemaker

11 Housewife

02 Student

12 Student

06 Other

13 Pre School

03 Retired

14 Retired

06 Other

15 Unemployed

97 Unknown

16 Unknown

06 Other

17 Unemployed Mr

06 Other

18 Military Service

No longer effective as of: 05-31-1994

Missouri's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Missouri

Item No.	Treatment Episode Data Set	Item	Value	State System Data
12	Detailed Not in Labor Force	-	Occupation	
06	Other	01	Professional	
06	Other	02	Farmers & Farm Manager	
06	Other	03	Managers, Officials, Proprietors	
06	Other	04	Clerical Workers	
06	Other	05	Sales Workers	
06	Other	06	Craftsmen	
06	Other	07	Operatives (Mechanical Industry)	
06	Other	08	Service & Private Household Workers	
06	Other	09	Farm Laborers	
06	Other	10	Laborers, Non Farm	
01	Homemaker	11	Housewife	
02	Student	12	Student	
06	Other	13	Pre School	
03	Retired	14	Retired	
06	Other	15	Unemployed	
97	Unknown	16	Unknown	
06	Other	17	Unemployed MR	
06	Other	18	Military Service	
13	Detailed Criminal Justice Referral Categories	-	Not Collected	
14	Marital Status	-	Marital Status	
01	Never Married	1	Never Married	
02	Now Married or Cohabiting	2	Married	
05	Widowed	3	Widowed	
04	Divorced	4	Divorced	
03	Separated (legally or otherwise absent)	5	Separated	
02	Now Married or Cohabiting	6	Remarried	
98	Not Collected	8	Not Collected	
97	Unknown	9	Unknown	

Missouri's Treatment Episode Data Set
Version : 1

K = Key Field

Optional

Missouri

Item

Item

No. Treatment Episode Data Set

Value

State System Data

14	Marital Status	-	Marital Status
01	Never Married	1	Never Married
02	Now Married or Cohabiting	2	Married
05	Widowed	3	Widowed
04	Divorced	4	Divorced
03	Separated (legally or otherwise absent)	5	Separated
02	Now Married or Cohabiting	6	Remarried
97	Unknown	9	Unknown

No longer effective as of: 06-30-2001

15	Days Waiting to Enter Treatment	-	Not Collected
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Missouri's Treatment Episode Data Set
Version : 1

K = Key Field

DischargeMissouri

Item No.	Treatment Episode Data Set	Item	Value	State System Data
104	Provider ID (At Discharge)	-	ADA Federal ID	
105	Client Identifier - (At Discharge)	-	State ID	
106	Co-Dependent/Collateral At Discharge	-	Co Depend Ind	
2	No		N	No
1	Yes		Y	Yes
109	Service at Discharge	-	Program Code	
06	Intensive Outpatient		102	CSTAR Women and Children
03	Hospital (Other than Detox)		103	CSTAR Adolescent
06	Intensive Outpatient		104	CSTAR General Adult
02	Free-Standing Residential		111	Social Setting Detox
01	Hospital Inpatient		112	Modified Medical Dextox
01	Hospital Inpatient		113	Medical Detoxification
08	Detoxification		114	Ambulatory Detox
03	Hospital (Other than Detox)		115	Hospital Inpatient (other than Detox)
04	Short-Term, <=30 days		116	Thirty Days Or Less Residential
05	Long-Term, >30 days		117	Over Thirty Days To One Year Residential
07	Outpatient		118	Outpatient
07	Outpatient		119	Methadone Treatment
07	Outpatient		127	Adult Clinical Intervention Program
07	Outpatient		128	Youth Clinical Intervention Program
07	Outpatient		140	Serious & Repeat Offender's Proj
06	Intensive Outpatient		142	Primary Recovery Plus (PR+)
02	Free-Standing Residential		143	SS Detox Primary Recovery Plus

Missouri's Treatment Episode Data Set
Version : 1

K = Key Field

DischargeMissouri

Item

Item

No. Treatment Episode Data Set

Value

State System Data

109 Service at Discharge

-

Program Code

06	Intensive Outpatient	102	CSTAR Women and Children
06	Intensive Outpatient	103	CSTAR Adolescent
06	Intensive Outpatient	104	CSTAR General Adult
02	Free-Standing Residential	111	Social Setting Detox
01	Hospital Inpatient	112	Modified Medical Dextox
01	Hospital Inpatient	113	Medical Detoxification
08	Detoxification	114	Ambulatory Detox
03	Hospital (Other than Detox)	115	Hospital Inpatient (other than Detox)
04	Short-Term, <=30 days	116	Thirty Days Or Less Residential
05	Long-Term, >30 days	117	Over Thirty Days To One Year Residential
07	Outpatient	118	Outpatient
07	Outpatient	119	Methadone Treatment
07	Outpatient	127	Adult Clinical Intervention Program
07	Outpatient	128	Youth Clinical Intervention Program
07	Outpatient	140	Serious & Repeat Offender's Proj

No longer effective as of: 12-31-2003

146 Date of Last Contact

-

Not Collected**147 Date of Discharge**

-

Close Date of Program Episode

Missouri's Treatment Episode Data Set
Version : 1

K = Key Field

DischargeMissouri

Item

Item

No. Treatment Episode Data Set

Value

State System Data

149	Reason for Discharge , Transfer or Discontinuance of Treatment	-	Discharge Status
04	Transferred to Another Substance Abuse Treatment Program or Facility	01	Transferred to another facility
03	Terminated by Facility	02	Administratively discontinued (no contact with client for 60 days
06	Death	03	Death
02	Left Against Professional Advice (Drop Out)	04	Client terminated services against advice
03	Terminated by Facility	05	Discharge - client would not comply with provider rules
01	Treatment Complete	06	Discharge, no referral
01	Treatment Complete	07	Discharge, referral
05	Incarcerated	08	Incarcerated
07	Other	09	Other
07	Other	10	Ineligible
08	Unknown	99	Unknown

Crosswalk Management System

REPORT CROSSWALK TO STATE

End of Report